

**Evaluation**

Please rate the overall following statements by marking a check inside the box which best corresponds to your opinion of the Symposium.

	Very Low	Low	Moderate	High	Very High
<b>Symposium Materials</b>					
Degree to which your objectives were met					
The value of material presented: Homeland Security USDA {Mann}					
The value of material presented: Homeland Security Efforts at APHIS {Anelli}					
The value of material presented: What is the National Animal Health Emergency Management System (NAHEMS)? {Lautner}					
The value of material presented: What is New in Food Safety and Security {Buntain}					
The value of material presented: Collaboration Between FEMA and USDA {Wilcox}					
<b>Overall Symposium</b>					
Overall value of this symposium for you					
The value of the Website as a source of information					
Anticipated usefulness of the symposium materials to you on-the-job					
The quality of the transmission to your broadcast site					
The quality of the video (if applicable)					
Effectiveness of the symposium for your learning purpose					

1. What were the strengths of this symposium?

2. What might we do MORE OF, BETTER, OR DIFFERENTLY to improve this Symposium? (Please use the reverse side if you need more space.)

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How did you view the symposium: Satellite broadcast \_\_\_\_\_ Videotape of broadcast \_\_\_\_\_  
Satellite Location Downlink (City & State): \_\_\_\_\_ Downlink Coordinator: \_\_\_\_\_  
Your Name: (Optional): \_\_\_\_\_

This program was reviewed and approved by AAVSB's RACE program for continuing education. Please contact the AAVSB's RACE program at 3100 Main Street, Suite 208, Kansas City, MO 64111 or info@aavsb.org should you have any comments/suggestions regarding this program.

Check applicable boxes and complete other information as appropriate:

**Veterinarian**

Employment:

- ☐ APHIS: *Unit Name:* \_\_\_\_\_
- ☐ Other USDA Agency: \_\_\_\_\_
- ☐ Other Fed GOV Agency: \_\_\_\_\_
- ☐ Military: *Branch of Service:* \_\_\_\_\_
- ☐ State GOV: *State:* \_\_\_\_\_
- ☐ State Diagnostic Lab: *State:* \_\_\_\_\_
- ☐ Private Diagnostic Lab: \_\_\_\_\_
- ☐ University: Faculty \_\_\_\_\_ Lab \_\_\_\_\_
- ☐ Student: *Area of Study* \_\_\_\_\_
- ☐ Industry: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

Job Title: \_\_\_\_\_

Related Education/Training:

- ☐ FAD Diagnostician
- ☐ Epidemiology  
Degree: \_\_\_\_\_  
Board Certification in: \_\_\_\_\_
- ☐ Pathology  
Degree: \_\_\_\_\_  
Board Certification in: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_  
Degree: \_\_\_\_\_  
Board Certification in: \_\_\_\_\_

Check applicable boxes and complete other information as appropriate:

**Non-Veterinarian**

Employment:

- ☐ APHIS: *Unit Name:* \_\_\_\_\_
- ☐ Other USDA Agency: \_\_\_\_\_
- ☐ Other Fed GOV Agency: \_\_\_\_\_
- ☐ Military: *Branch of Service:* \_\_\_\_\_
- ☐ State GOV: *State:* \_\_\_\_\_
- ☐ State Diagnostic Lab: *State:* \_\_\_\_\_
- ☐ Private Diagnostic Lab: \_\_\_\_\_
- ☐ University: Faculty \_\_\_\_\_ Lab \_\_\_\_\_
- ☐ Student: *Area of Study* \_\_\_\_\_
- ☐ Industry: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

Job Title: \_\_\_\_\_

Related Education/Training:

Area of Study: \_\_\_\_\_

Degree: \_\_\_\_\_